

ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA

} ss

County of Maricopa

CERTIFICATE NO. - 32 -

DOCKET NO. EMS 3457

THE ARIZONA DEPARTMENT OF HEALTH SERVICES has found, under the authority of A.R.S. § 36-2232 et seq and Pursuant to Department of Health Services rules, that public necessity requires the operation of

CITY OF DOUGLAS dba DOUGLAS AMBULANCE SERVICE

as a ground ALS and BLS ambulance service in the State of Arizona for the transportation of individuals who are sick, injured, wounded or otherwise incapacitated or helpless within the following service area, with the following central operations station and response times:

1. Service Area:

*Beginning at the border of Arizona and Mexico at the southwest corner of Section 19, T24S R26E,
then north to the northwest corner of Section 19, T22S R26E,
then east to southwest corner of Section 18, T22S R28E,
then in a northeasterly direction to the southeast corner of the northeast ¼ of Section 28, T16S R30E,
then in a northeasterly direction to the border of Arizona and New Mexico at the southeastern corner
of Section 14, T15S R32E,
then south along the Arizona/New Mexico border to the southeast corner of Section 23, T24S R32E,
then west along the border of Arizona/Mexico to the southwest corner of Section 19, T24S R26E, or
point of beginning.*

2. Legal Address: 1400 10th Street, Douglas, Arizona.

3. Response Times:

- a. Ten (10) minutes on 91.5% to 93% of all ambulance calls.
- b. Twenty (20) minutes on 96.5% to 98% of all ambulance calls.
- c. Sixty (60) minutes on 98.5% to 100% of all ambulance calls.

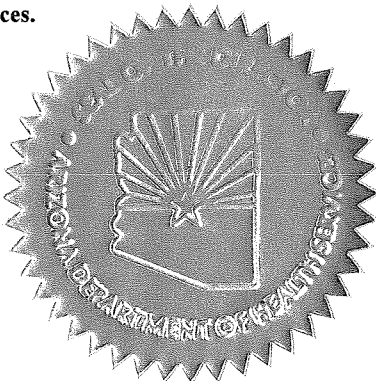
Now, therefore, by virtue of the authority vested in the Arizona department of Health Services, under the constitution and laws of the State of Arizona, does hereby grant this

RENEWAL

CERTIFICATE OF NECESSITY

authorizing the operation of the aforesaid ambulance service for a period ending January 31, 2013 unless for cause sooner amended, suspended, revoked or terminated subject to the decisions and orders, and rules of the Department.

PROVIDED, that this certificate shall not be assigned nor transferred unless authorized by the Arizona Department of Health Services.



BY THE ORDER OF THE ARIZONA DEPARTMENT OF HEALTH SERVICES, IN WITNESS WHEREOF, I WILL HUMBLE

the interim Director of the Arizona Department of Health Services, have hereunto set my hand and caused the official seal of the Arizona Department of Health Services to be affixed at Phoenix, Arizona on 12-7-07


DIRECTOR